

Welcome!

Senior and Disabilities Services
Critical Incident Report training

Senior and Disabilities Services
Critical Incident Report
(CIR)
and
Critical Incident Improvement Plan
(CIIP) Processes

June-September
2009 Series



Critical Incident Reports



*Providers are the bedrock of supports in
our communities*

- SDS is responsible for monitoring health and safety of recipients
- Through the supports given by providers

Critical Incident Reports



*Good communication can help us
find our way through the "forest"*

- Required part of HCB waivers (from Medicaid- CMS)
- A communication tool between providers and SDS

Critical Incident Improvement Plan



Providers give support to
vulnerable Alaskans

- CIIPs will increase
 - Support to providers
 - Are already experiencing and responding to Critical Incidents
- Majority of responses appropriate per health and safety

CIR and CIIP Together



Gathering knowledge helps build
new ways to support people

- Collecting aggregate information
 - Identifying trends and gaps in services
 - Data and experiences will help shape supports to fit needs of vulnerable Alaskans now and in the future

What is a Critical Incident?



A critical incident stands out from what you already know about the person and what you already do to support him or her.

- [CIR form](#) has a list of incident categories that require reporting
- A significant event or episode that is out of the ordinary
- Not addressed by interventions described in the care plan

Safety concerns

Critical Incident
occurs

Safety Concerns

- Missing person when law enforcement is involved
- Harm to self or others when the intervention escalates to a point beyond the treatment/service plan
 - Including missing person

Medical Events

- Medical Events
 - Death of a recipient
 - For end of life care, follow service plan
 - Report all deaths using the CIR process
 - Injury or change in condition requiring medical intervention while in service
 - Medical intervention: person seen by medical professional who makes a decision about their care (Doctor, Nurse, ANP, Paramedic, ER visit, etc)

Medical Errors

- When person is in a 24 hour care facility
- Medical Error requiring medical intervention requires CIR within 72 hours
- Medical Errors not requiring medical intervention require **quarterly reporting**

Medical Error Critical Incident

- Medical Error occurring in a 24 hour facility*
 - Whether person takes own meds or is assisted by staff under nursing delegation

*When medical error requires medical intervention

Medical Error Critical Incident

- Types of medical errors to report using CIR form, within 72 hours*
 - Non-documentation: instances of person taking or being assisted to take medication not documented
 - Person not taking or being assisted to take medication at a scheduled time

*When person is in 24 hour care facility, and medical error requires medical intervention

Medical Error Critical Incident

- And, person taking or being assisted to take medication*:
 - Time other than scheduled
 - Not prescribed route
 - Medication not intended for recipient
 - Medication given to another person
 - Incorrect dosage
- *When person is in 24 hour care facility, and medical error requires medical intervention

Quarterly Report for Medical Errors

- Medical Errors not requiring medical intervention require **quarterly reporting**
 - When individual is in 24 hr care setting
 - Within 30 days of end of quarter in which error occurred
 - [Sample quarterly report](#)

Law Enforcement Issues, Sexual Assault

- Law Enforcement issues
 - Law Enforcement response
 - Except when part of the service plan
 - If incident escalates past services in plan- can be a CIR
- Sexual assault whether recipient is victim or alleged perpetrator

[CIR Quick Reference Chart](#)

People served and CIRs

- CIRs are submitted for anyone in services who has a service plan (care plan)
 - Waiver, Grant, General Relief, and PCA
- CIRs do not replace mandatory reporting to APS and OCS
 - Reporting to Assisted Living Licensing required per ALL policy and procedure

Who can make a CIR?

- Anyone who
 - Witnesses an event or circumstance
 - Becomes aware of an event of circumstance
 - Administrators/supervisors
 - Fills out [SDS Critical Incident Report form](#)
 - Write NA in areas not applicable to situation
 - Fax now: (907) 269-3690
 - email available soon

CIR Process

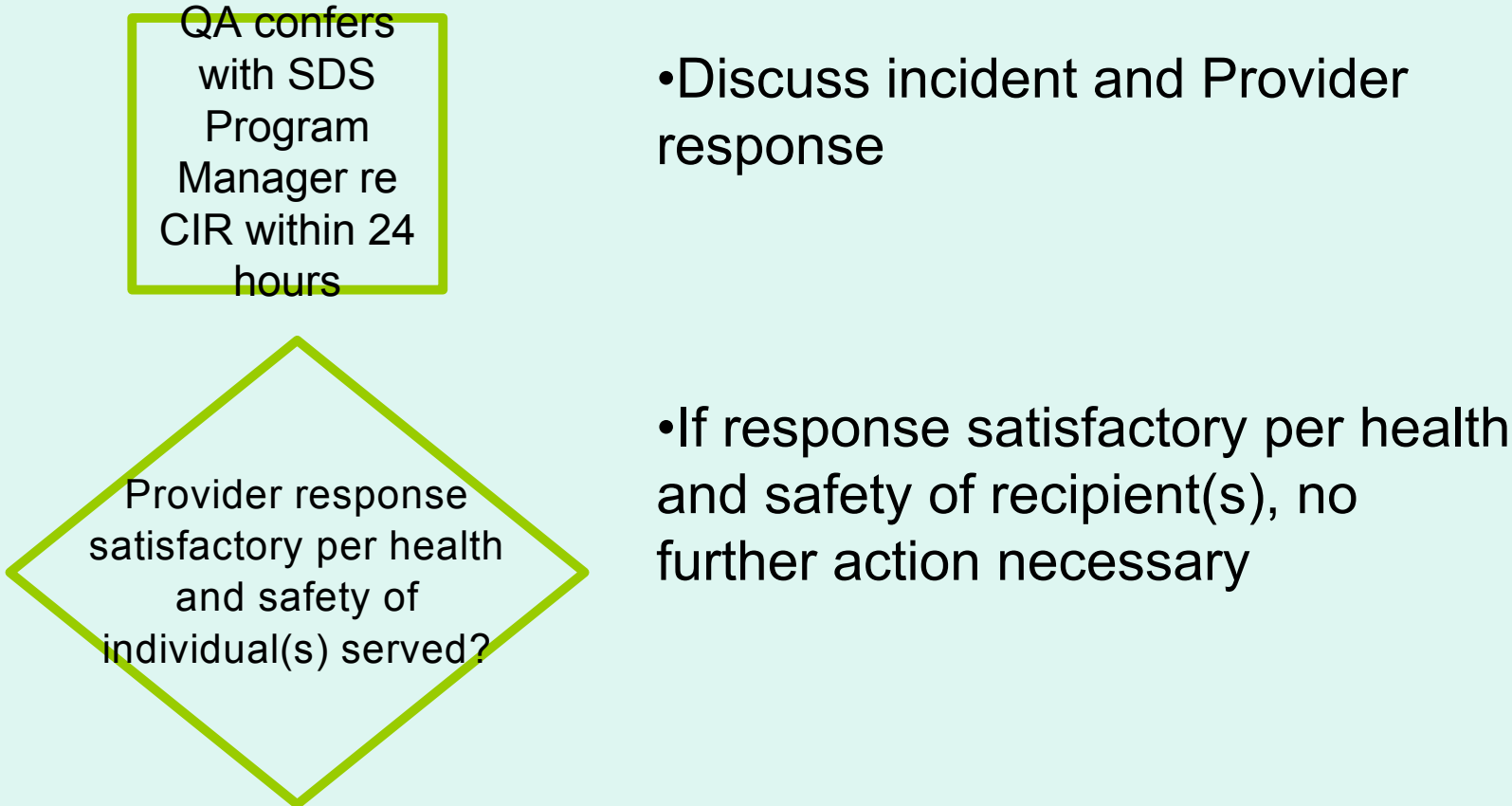
Within 72 hours
Provider must
send Critical
Incident Report
(CIR) to QA

QA receives CIR

- Date-stamps CIR
- Incident Database
- Reviews provider file
- Copy of CIR (and quarterly med error report if applicable) to SDS Program Manager

[CIR/CIIP process graphic](#)

CIR Process



```
graph TD; A[QA confers with SDS Program Manager re CIR within 24 hours] --> B{Provider response satisfactory per health and safety of individual(s) served?}; B --> C[Discuss incident and Provider response]; B --> D[If response satisfactory per health and safety of recipient(s), no further action necessary];
```

QA confers
with SDS
Program
Manager re
CIR within 24
hours

- Discuss incident and Provider response

Provider response
satisfactory per health
and safety of
individual(s) served?

- If response satisfactory per health and safety of recipient(s), no further action necessary

CIIP Process

SDS Program
Manager
coordinates with
Provider to resolve

Critical Incident
Improvement Plan
(CIIP) needed?

- If health and safety issues still present, SDS Program Manager may:
 - Request additional info
 - Visit the site
 - interview staff
 - assess Provider documents such as reports related to CIR, Provider P and P, staff credentials and training
- SDS Program Manager may request Provider develop and submit CIIP

CIIP Process

SDS Program Manager
notifies QA that CIIP is
needed. Provider notified
to submit CIIP

- SDS Program Manager and QA consult with Provider to determine specific improvement plan

Provider
submits CIIP to
QA

- Provider develops CIIP
- CIIP to include
 - Preventative actions
 - Provider response improvements
 - Date these actions will start
 - Provider staff responsible
- [Sample CIIP](#)

CIIP Process

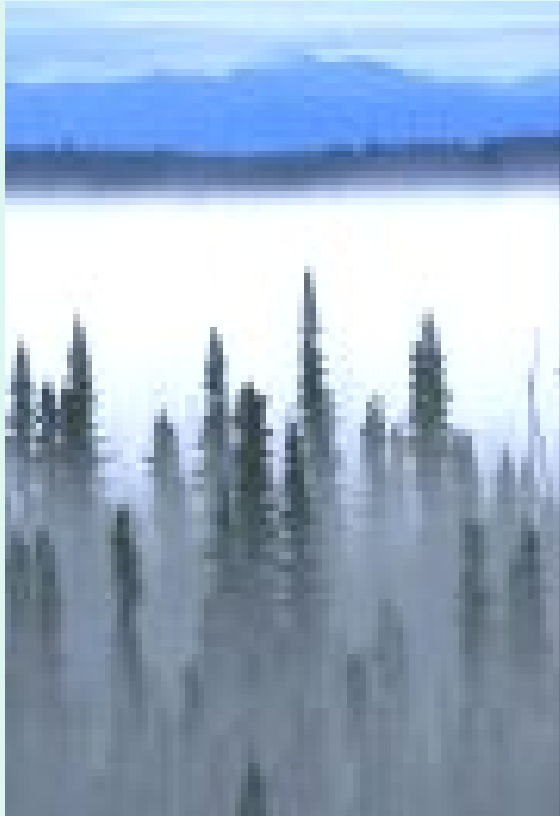
QA tracks and monitors to completion, follows up with Program Manager

- Maintain CIR database
- Monitor Provider assistance
 - Requests for info
 - CIIP completions
- Use data for research and analysis
- Aggregate data used for risk management methods
 - Track and trend incident patterns
 - Evaluate CIIP and other assistance effectiveness
 - Look for areas to improve quality within SDS and Providers

CIR form

- Let's look at the [CIR/CIIP Policy and form](#)
- CIR form is available at
<http://www.hss.state.ak.us/dsds/docs/CritIncRepSDS15-1.pdf>
- Changes can be saved

CIR and CIIP Processes



Questions?
Feedback?

Thank you!

- Certificates of attendance are available
- All class presentation materials and learning objects are available
- Will be sent by email
- Please write a note in the text chat indicating which (or both) you would like to receive.



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